* U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

3. Name and address of person filing.		4. Name, file number, and address of labor organization.			
Name Alan	M: Scheer			Brotherhood of Boilermakers	
P.O. Box, Bidg., Room No., if any		P.O. Box, Building and Room Number, if any			
Street 697-A Rhea	County Hwy.	Street 753	State Ave,	Suite 570	
City Dayton		City _{Kan}	sas City		
State Tennessee	ZIP Code + 4 37321	State Kan	sas	ZIP Code + 4 66101	
Enter appropriate dat	Director, Railroad Division a below If, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor chil	d directly or indi	rectly had any of the following interests	
A. Held an interest in, e monetary value from a	engaged in transactions (including loans) with, or n employer whose employees your organizati	derived income	or other econo	mic henefit of	
6. Name and address of Employer (including trade name, if any).		7.a. Nature of Interest, Transaction, or Income.			
Name	***************************************				
Trade Name, if any:		:			
P.O. Box, Bldg., Room No., if any		•			
Street		7.b. Amount.			
City					
State	ZIP Code + 4				
	Sign	ature			
submitted in this report	ification. The undersigned declares, under penalty of (including the information contained in any accompany ge and belief, true, correct, and complete. (See the se	ina documents).	has been examin	ned by the signatory and is, to the best of the	
Signed Ula	m. Scheer	On 8/8/	2005	423~570~0211	
			Date	Telephone Number	